

Let's have a conversation about



TOBACCO DURING PREGNANCY

and beyond

VERMONT DEPARTMENT OF HEALTH

PEOPLE WHO ARE PREGNANT, TRYING TO GET PREGNANT OR BREASTFEEDING

are encouraged not to use tobacco products for their health and the health of their baby. But quitting smoking can be one of the most difficult things a person can do. Despite all the information and all the advertising and social pressures, sometimes it can seem nearly impossible. But if you're pregnant, trying to be, or have just had a baby, you have the strength to do anything. Sometimes you just need a little help, some good information, or someone to talk to to take that important step for the health of you and your baby.

While nothing beats an open, honest conversation with your healthcare professional, here are some answers to your most common questions, both to give you the truth about tobacco and pregnancy risks and to inform that next conversation with your provider.

IS ANY AMOUNT SAFE?

Almost everyone has heard that there is no known safe amount of tobacco use during pregnancy. Smoking lowers the amount of food and oxygen your baby gets. The less you smoke, the lower the risk of problems for both you and your baby. So while cutting back helps, quitting as soon as possible is always the best way to a healthy pregnancy.

HOW CAN IT AFFECT MY BABY?

People who smoke have a higher risk of miscarriage and ectopic pregnancy (a dangerous complication where the embryo grows outside the uterus). Smoking increases your chances of premature delivery, placental problems, lower birth weight, stillbirth and sudden unexpected infant death (SUIDs). It increases your baby's risk for asthma and respiratory illnesses. Babies born to people who smoke can suffer from nicotine withdrawal. Studies have shown the link between smoking while pregnant and behavioral problems in childhood, like attention deficit hyperactivity disorder (ADHD) and even a higher likelihood of being overweight.

I SMOKED BEFORE I KNEW I WAS PREGNANT. WHAT NOW?

The chances are, if you smoked before you knew you were pregnant, that no harm was done. But the longer you wait to quit, the higher those chances grow-especially during the 3-8 week period where rapid development occurs.

WHAT ABOUT VAPING?

While vaping may expose your baby to fewer toxins than smoking, it is not a safe alternative. Your baby will still be exposed to nicotine, flavorings and other dangerous chemicals found in e-cigarettes.

WHAT ABOUT REPLACEMENT THERAPIES?

Cigarette smoke contains thousands of chemicals, so anything that reduces smoking is better than continuing to smoke. But nicotine, present in all replacement therapies, by itself can harm a baby's development. Some therapies, like the patch, feed a constant stream into the body, so nicotine levels never reduce. Talk to your healthcare professional about nicotine replacement therapies and what may be the best choice for you personally.

HOW ABOUT BREASTFEEDING?

Smoking can reduce the production of breast milk making breastfeeding more difficult. And nicotine and other harmful chemicals from tobacco are found in breast milk, so it's best to not smoke while breastfeeding.

HOW LONG IS NICOTINE IN MY BREAST MILK?

Nicotine remains in breast milk for at least three hours after smoking, and traces may be present much longer. If you must smoke, it's best to do so after breastfeeding and, of course, away from your baby.

WHERE CAN I FIND HELP?

Visit 802 quits.org for more information or help quitting, call 1-800-QUIT-NOW (1-800-784-8669) or talk to your healthcare professional.

For more information, there's no better resource than your healthcare professional. Remember, they're not there to judge. They're there to help you have the healthiest pregnancy possible. Keep the conversation going.



